Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

 (Currently Amended) A method of determining a therapy for creating an implant for treating ioint disease, which method comprises:

obtaining electronic image data of a joint;

electronically evaluating said image data to obtain obtaining from image data of a joint information about the three-dimensional geometry of the joint, wherein electronically evaluating includes electronically deriving wherein the information includes information on the thickness or shape of at least one of articular cartilage, including normal and/or diseased articular cartilage, and subchondral bone to determine at least a portion of the geometry of an implant; and

creating an implant based on the three-dimensional geometry of the joint, wherein at least a portion of said implant has a an outer surface based on the derived information thickness similar to that of normal articular eartilage adjacent to diseased articular cartilage.

- 2. 6. (Cancelled)
- 7. (Currently Amended) The method of claim 1, wherein said image data is obtained using ultrasound data, computed tomography data, positron emission tomography data, a single photon emission computed tomography scan, or MRI data.
- 8. 9. (Cancelled)
- 10. (Currently Amended) A method of determining a therapy for creating an implant for treating joint disease, which method comprises:

obtaining electronic image data of a joint;

electronically evaluating said image data to obtain obtaining from image data of a joint information about the three-dimensional geometry of the joint, wherein the information includes

wherein electronically evaluating includes electronically deriving information on the thickness of articular cartilage, including normal and/or diseased cartilage; and

creating an implant having an outer surface derived at least in part based on the thickness of the normal articular cartilage selecting or designing a therapy, wherein said therapy is an implant.

11. - 14. (Cancelled)

15. (Currently Amended) The method of claim 10, wherein said image data is obtained using ultrasound <u>data</u>, computed tomography <u>data</u>, positron emission tomography <u>data</u>, a single photon emission computed tomography scan, or MRI data.

16. - 17. (Cancelled)

18. (Currently Amended) The method of claim 10, wherein said implant emprises is configured to repair an area of said diseased articular cartilage as well as adjacent normal tissue.

19. (Previously Presented) The method of claim 18, wherein said adjacent normal tissue is bone, bone marrow, or normal articular cartilage.

20. (Previously Presented) The method of claim 10, wherein said implant is created with use of a 3D Euclidian distance transformation.

- 21. (Currently Amended) The method of claim 10, wherein at least a portion of said implant is configured to be implantable implanted into a knee joint.
- (Currently Amended) The method of claim 10, wherein said implant <u>further comprises earries</u> cartilage cells or cartilage matrix.

23. - 54. (Cancelled)

55. (Currently Amended) The method of claim 1, wherein said implant emprises is configured to repair an area of said diseased articular cartilage as well as adjacent normal tissue.

56. (Previously Presented) The method of claim 55, wherein the adjacent normal tissue is at least one of bone, bone marrow, and normal articular cartilage.

57. (Currently Amended) The method of claim 1, wherein the implant eomprises is configured to repair an area representing encompassing at least a portion of said diseased articular cartilage.

58. (Currently Amended) The method of claim 1, wherein the implant eomprises is configured to repair an area representing encompassing at least a portion of said normal articular cartilage.

59. (Previously Presented) The method of claim 1, wherein the implant is created with use of a 3D Euclidian distance transform.

60. (Currently Amended) The method of claim 1, wherein at least a portion of said implant is configured to be implantable implanted into a knee joint.

61. (Currently Amended) The method of claim 1, wherein the implant earries <u>further comprises</u> cartilage cells or cartilage matrix.

62. - 65. (Cancelled)

66. (Previously Presented) The method of claim 10, wherein said implant is also based on a contact pattern.

67. (Previously Presented) The method of claim 66, wherein said contact pattern is derived from

static alignment.

68. (Previously Presented) The method of claim 66, wherein said contact pattern is derived from

dynamic loading.

69. (Currently Amended) The method of claim 68, wherein said dynamic loading is estimated for

normal gait.

70. (Previously Presented) The method of claim 66, wherein said contact pattern is derived on an

image.

71. (Previously Presented) The method of claim 66, wherein said contact pattern is derived in

three dimensions.

72. - 84. (Cancelled)

85. (Currently Amended) The method of claim 10, wherein the implant emprises is configured

to repair an area representing encompassing at least a portion of said diseased articular cartilage.

86. (Currently Amended) The method of claim 10, wherein the implant eomprises is configured

to repair an area representing encompassing at least a portion of said normal articular cartilage.

87. - 93. (Cancelled)

94. (Currently Amended) The method of claim 1, wherein said derived information only includes

information on normal and/or diseased articular cartilage in at least one portion of the joint.

95. (Previously Presented) The method of claim 1, wherein said derived information includes

information on normal articular cartilage adjacent to diseased articular cartilage in at least one

portion of the joint.

96. (Currently Amended) The method of claim 1, wherein the step of creating an implant further includes creating a thickness of a second portion of said implant that is substantially the same as

similar to a thickness of said normal articular cartilage in at least one portion of the joint,

97. (Currently Amended) The method of claim 1, wherein the step of creating an implant further

includes creating a thickness of a second portion of said implant that is fixed and the fixed

thickness is substantially the same as similar to a thickness of said normal articular cartilage in at

least one portion of the joint.

98. (Currently Amended) The method of claim 1, wherein the step of creating an implant further

includes creating a thickness of a second portion of said implant that is substantially the same as

 $\underline{similar\ to}\ a\ thickness\ of\ said\ normal\ articular\ cartilage\ adjacent\ to\ diseased\ articular\ cartilage\ in$

at least one portion of the joint.

99. (Currently Amended) The method of claim 1, wherein said implant is configured to be

located in at least one of a medial femoral condyle, a lateral femoral condyle, or both femoral

condvles of the joint.

100. (Currently Amended) The method of claim 1, wherein said implant is configured to be

located in at least one femoral condyle and the notch region of a joint.

101. (Currently Amended) The method of claim 1, wherein said implant is configured to be

located in at least one of a medial tibial plateau, a lateral tibial plateau, or an entire tibial plateau

of the joint.

102. (Currently Amended) The method of claim 1, wherein said implant is configured to be

located in at least one of a medial patella, a lateral patella, an entire patella, or an entire joint.

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103. (Currently Amended) The method of claim 1, wherein said implant includes is configured based on an isosurface of said subchondral bone.

104. (Previously Presented) The method of claim 1, wherein said implant is based on polygons.

105. (Previously Presented) The method of claim 104, wherein said polygons are derived using a tessellation.

106. (Currently Amended) The method of claim 10, wherein said derived information includes information on normal and/or diseased articular cartilage in at least one portion of the joint.

107. (Previously Presented) The method of claim 10, wherein said derived information includes information on normal articular cartilage adjacent to diseased articular cartilage in at least one portion of the joint.

108. (Currently Amended) The method of claim 10, wherein the step of creating an implant further comprises creating a thickness of a portion of said implant is substantially the same as similar to a thickness of said normal articular cartilage in at least one portion of the joint.

109. (Currently Amended) The method of claim 10, wherein the step of creating an implant further comprises creating a thickness of a portion of said implant is fixed and the fixed thickness is substantially the same as similar to a thickness of said normal articular cartilage in at least one portion of the joint.

110. (Currently Amended) The method of claim 10, wherein the step of creating an implant further comprises creating a thickness of a portion of said implant is substantially the same as similar to a thickness of said normal articular cartilage adjacent to diseased articular cartilage in at least one portion of the joint.

111. (Currently Amended) The method of claim 10, wherein said implant is configured to be located in at least one of a medial femoral condyle, a lateral femoral condyle, or both femoral condyles of the joint.

112. (Currently Amended) The method of claim 10, wherein said implant is configured to be located in at least one femoral condyle and the notch region of the joint.

113. (Currently Amended) The method of claim 10, wherein said implant is configured to be located in at least one of a medial tibial plateau, a lateral tibial plateau, or an entire tibial plateau of the joint.

114. (Currently Amended) The method of claim 10, wherein said implant is configured to be located in at least one of a medial patella, a lateral patella, an entire patella, or an entire joint of the joint.

115. (Previously Presented) The method of claim 1, wherein said implant is also based on a contact pattern.

116. (Previously Presented) The method of claim 115, wherein said contact pattern is derived from static alignment.

117. (Previously Presented) The method of claim 115, wherein said contact pattern is derived from dynamic loading.

118. (Currently Amended) The method of claim 117, wherein said dynamic loading is estimated for normal gait.

119. (Previously Presented) The method of claim 115, wherein said contact pattern is derived on

an image.

120. (Previously Presented) The method of claim 115, wherein said contact pattern is derived in three dimensions.

121. (Currently Amended) The method of claim 10, wherein said implant eomprises is configured to repair an area representing encompassing bone or bone marrow.

122. (Previously Presented) The method of claim 10, wherein said image data undergoes a segmentation.

123. (Previously Presented) The method of claim 122, wherein said segmentation is used to segment articular cartilage.

124. (Previously Presented) The method of claim 123, wherein said articular cartilage is normal cartilage.

125. (Previously Presented) The method of claim 123, wherein said articular cartilage is diseased cartilage.

126. (Previously Presented) The method of claim 122, wherein said segmentation is used to segment bone.

127. (Previously Presented) The method of claim 10, wherein said image data are used to derive a three-dimensional model that includes normal and/or diseased articular cartilage.

128. (Currently Amended) The method of claim 127, wherein said three-dimensional model includes one or more static relationship transformations between a femur and tibia of the joint.

- 129. (Currently Amended) The method of claim 127, wherein said three-dimensional model includes at least one sequence of transformations between <u>a</u> femur and tibia <u>of the joint</u>.
- 130. (Previously Presented) The method of claim 127, wherein said three-dimensional model is merged with one or more load alignment estimations.
- 131. (Previously Presented) The method of claim 130, wherein said one or more load alignment estimations include at least one of load alignment in standing or weight-bearing position, load alignment in lying or non-weight-bearing position, and load alignment during joint motion.
- 132. (Currently Amended) The method of claim 10, wherein a thickness of said implant is derived from a thickness of cartilage at compared to an implantation site.
- 133. (Currently Amended) The method of claim 10, wherein a curvature of the outer surface of said implant is derived from a curvature of a surface of empared to an implantation site.
- 134. (Currently Amended) The method of claim 10, wherein said electronically deriving information on the thickness of articular cartilage, including normal and/or diseased cartilage, includes evaluating information of articular cartilage defects.
- 135. (Currently Amended) The method of claim 134, wherein said evaluating articular cartilage defects obtaining information includes evaluating a region of said articular cartilage defect and contiguous parts of said articular cartilage surrounding said region of said articular cartilage defect
- 136. (Currently Amended) The method of claim 134, wherein said evaluating information of articular cartilage defects is used to determine one or more dimensions of said implant.
- 137. (Currently Amended) The method of claim 1, wherein said implant comprises is configured

to repair an area representing encompassing bone or bone marrow.

138. (Previously Presented) The method of claim 1, wherein said image data undergoes a segmentation.

139. (Previously Presented) The method of claim 138, wherein said segmentation is used to segment articular cartilage.

140. (Previously Presented) The method of claim 139, wherein said articular cartilage is normal cartilage.

141. (Previously Presented) The method of claim 139, wherein said articular cartilage is diseased cartilage.

142. (Previously Presented) The method of claim 138, wherein said segmentation is used to segment bone.

143. (Previously Presented) The method of claim I, wherein said image data are used to derive a three-dimensional model that includes normal and/or diseased articular cartilage.

144. (Currently Amended) The method of claim 143, wherein said three-dimensional model includes one or more static relationship transformations between a femur and tibia of the joint.

145. (Currently Amended) The method of claim 143, wherein said three-dimensional model includes at least one sequence of transformations between a femur and tibia of the joint.

146. (Previously Presented) The method of claim 143, wherein said three-dimensional model is merged with one or more load alignment estimations.

- 147. (Previously Presented) The method of claim 146, wherein said one or more load alignment estimations include at least one of load alignment in standing or weight-bearing position, load alignment in lying or non-weight-bearing position, and load alignment during joint motion.
- 148. (Currently Amended) The method of claim 1, wherein said a thickness of said implant is derived from a thickness of cartilage at compared to an implantation site.
- 149. (Currently Amended) The method of claim 1, wherein a curvature of the outer surface of said implant is derived from a curvature of a surface of empared to an implantation site.
- 150. (Currently Amended) The method of claim 1, wherein said electronically deriving information on the thickness of articular cartilage, including normal and/or diseased cartilage, and subchondral bone includes evaluating information of articular cartilage defects.
- 151. (Currently Amended) The method of claim 150, wherein said evaluating articular cartilage defects obtaining information includes evaluating a region of said articular cartilage defect and contiguous parts of said articular cartilage surrounding said region of said articular cartilage defect.
- 152. (Currently Amended) The method of claim 150, wherein said evaluating information of articular cartilage defects is used to determine one or more dimensions of said implant.
- 153. (Currently Amended) A method of determining a therapy of forming a physical model for repairing a joint disease; which method comprises:

obtaining electronic image data of a joint;

electronically evaluating said image data of a joint to obtain from image data of a joint information about the three-dimensional geometry of subchondral bone of the joint, wherein electronically evaluating includes electronically deriving information on the shape of articular cartilage, including normal and/or diseased cartilage; and

selecting or designing a therapy, wherein said therapy is an implant forming a physical model having an outer surface shaped in at least a portion based on a curvature of the subchondral bone.

154 - 189. (Cancelled)

190. (Currently Amended) A method of <u>creating a device for treating an articular joint</u>, which method comprises:

obtaining electronic image data of a joint:

electronically evaluateing said-deriving from image data of a joint to obtain information about the three-dimensional a geometry of at least a portion of a surface of subchondral bone of the joint, wherein electronically evaluating includes electronically deriving information on one or more articular defects, including eartilage; and

creating a physical model of at least a portion of the joint, wherein the model has an outer surface configured as an articular surface and having at least a portion configured from the geometry of the subchondral bone selecting or designing a therapy, wherein said therapy is an implant.

191 - 227. (Cancelled)

228. (New) The method of claim 153, wherein the physical model comprises a bone replacement material.

229. (New) The method of claim 153, wherein at least a portion of the outer surface matches a curvature of the subchondral bone.

230. (New) The method of claim 229, wherein at least a portion of the curvature is a threedimensional curvature of the subchondral bone.

- 231. (New) The method of claim 153, wherein at least a portion of the outer surface substantially matches the dimensions of diseased cartilage of the joint in at least one direction.
- 232. (New) The method of claim 231, wherein at least a portion of the outer surface substantially matches the dimensions of the diseased cartilage of the joint in the anteroposterior direction.
- 233. (New) The method of claim 231, wherein at least a portion of the outer surface substantially matches the dimensions of the diseased cartilage of the joint in the mediolateral direction.
- 234. (New) The method of claim 231, wherein at least a portion of the outer surface substantially matches the dimensions of the diseased cartilage of the joint in the superoinferior direction.
- 235. (New) The method of claim 153, wherein the physical model further comprises an inner surface.
- 236. (New) The method of claim 235, wherein at least a portion of the inner surface substantially matches the dimensions of diseased cartilage of the joint in at least one direction.
- 237. (New) The method of claim 236, wherein at least a portion of the inner surface substantially matches the dimensions of the diseased cartilage of the joint in the anteroposterior direction.
- 238. (New) The method of claim 236, wherein at least a portion of the inner surface substantially matches the dimensions of the diseased cartilage of the joint in the mediolateral direction.
- 239. (New) The method of claim 190, wherein the physical model comprises a bone replacement material
- 240. (New) The method of claim 190, wherein at least a portion of the outer surface matches a curvature of the subchondral bone.

- 241. (New) The method of claim 240, wherein the curvature is a three-dimensional curvature of the subchondral bone.
- 242. (New) The method of claim 190, wherein at least a portion of the outer surface substantially matches the dimensions of diseased cartilage of the joint in at least one direction.
- 243. (New) The method of claim 242, wherein at least a portion of the outer surface substantially matches the dimensions of the diseased cartilage of the joint in the anteroposterior direction.
- 244. (New) The method of claim 242, wherein at least a portion of the outer surface substantially matches the dimensions of the diseased cartilage of the joint in the mediolateral direction.
- 245. (New) The method of claim 242, wherein at least a portion of the outer surface substantially matches the dimensions of the diseased cartilage of the joint in the superoinferior direction.
- 246. (New) The method of claim 190, wherein the physical model further comprises an inner surface
- 247. (New) The method of claim 246, wherein at least a portion of the inner surface substantially matches the dimensions of diseased cartilage of the joint in at least one direction.
- 248. (New) The method of claim 247, wherein at least a portion of the inner surface substantially matches the dimensions of the diseased cartilage of the joint in the anteroposterior direction.
- 249. (New) The method of claim 247, wherein at least a portion of the inner surface substantially matches the dimensions of the diseased cartilage of the joint in the mediolateral direction.
- 250. (New) The method of claim 190, wherein the physical model is further based on a

geometry of articular cartilage of the joint.

251. (New) The method of claim 190, wherein the physical model is created by a digital manufacturing method.

252. (New) The method of claim 251, wherein the digital manufacturing method is rapid prototyping.

253. (New) The method of claim 190, wherein the physical model is created using a computer aided design system.

254. (New) The method of claim 1, wherein the implant is created by a digital manufacturing method

255. (New) The method of claim 254, wherein the digital manufacturing method is rapid prototyping.

256. (New) The method of claim 1, wherein the implant is created using a computer aided design system.